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NOTICE OF ALLOWANCE AND FEE(S) DUE

21394

7590

03/28/2007

ARTHROCARE CORPORATION 680 VAQUEROS AVENUE SUNNYVALE, CA 94085-3523

TV A	EXAMINER			
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СОНЕ	EN, LEE S			
ART UNIT	PAPER NUMBER			
3739				

DATE MAILED: 03/28/2007

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/682,600	10/09/2003	Lewis Sharps	S-09R	2705

TITLE OF INVENTION: METHODS FOR REPAIRING DAMAGED INTERVERTEBRAL DISCS

APPLN. TYPE	, SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	06/28/2007

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE DOES NOT REFLECT A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE IN THIS APPLICATION. IF AN ISSUE FEE HAS PREVIOUSLY BEEN PAID IN THIS APPLICATION (AS SHOWN ABOVE), THE RETURN OF PART B OF THIS FORM WILL BE CONSIDERED A REQUEST TO REAPPLY THE PREVIOUSLY PAID ISSUE FEE TOWARD THE ISSUE FEE NOW

HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

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- A. Pay TOTAL FEE(S) DUE shown above, or
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- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

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Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
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21394 ARTHROCAR 680 VAQUERO SUNNYVALE,	RE CORPORATIONS AVENUE	72007 DN		Cert	ificate of Mailing or Trans	
						(Depositor's name)
						(Signature)
						(Date)
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10/682,600	10/09/2003		Lewis Sharps		S-09R	2705
TITLE OF INVENTION	: METHODS FOR REP		TERVERTEBRAL DISC			
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nonprovisional	NO	\$1400	\$0	\$0 •	\$1400	06/28/2007
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	J		
	I, LEE S ence address or indicatio	3739	606-032000			
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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☐ Issue Fee			☐ A check is enclosed. ☐ Payment by credit ca	rd. Form PTO-2038	ge the required fee(s), any de	
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21394 7590 · 03/28/2007 ARTHROCARE CORPORATION		^	EXAM	EXAMINER	
			COHEN	COHEN, LEE S	
680 VAQUEROS			ART UNIT	PAPER NUMBER	
SUNNYVALE, C	CA 94085-3523		3739 DATE MAILED: 03/28/200	7	

Determination of Patent Term Extension or Adjustment under 35 U.S.C. 154 (b)

A reissue patent is for "the unexpired part of the term of the original patent." See 35 U.S.C. 251. Accordingly, the above-identified reissue application is not eligible for Patent Term Extension or Adjustment under 35 U.S.C. 154(b).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 or (571)-272-4200.